## Wisconsin Department of Regulation & Licensing

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Ch. 457, Stats.

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## MARRIAGE AND FAMILY THERAPY, PROFESSIONAL COUNSELING, AND SOCIAL WORK EXAMINING BOARD

## APPLICATION TO CONVERT CURRENT OR PENDING PROFESSIONAL COUNSELOR TRAINING CERTIFICATE TO TRAINING LICENSE

PLEASE TYPE OR PR	INT IN INK			
Last Name		First Name	MI	Former / Maiden Name(s)
Street Address (number, street, city, state, zip)				Daytime Telephone Number
Training Certificate N	umber	Grant Date		Expiration Date
		AFFIDAVIT OF APPL	ICANT	<u>I</u>
I, the above-named ap	plicant, state and affirm th	at:		
I hold a curre	nt Professional Counselor	Training Certificate or hav	e a pendin	g application on file with the Department.
_	application information that and valid.	at I provided to the Section	for my Pi	rofessional Counselor Training Certificate is still
☐ I request that Training Lice		ion referenced above be tr	ansferred	to this application for a Professional Counselor
		ntisfies all requirements of of the Marriage and Family		Statutes 457.13. A training license is valid for
Signature of Applicant Provision of false info		may be grounds for revoca		e signed credential.
APPLICATION FEES Please check applicable payable to Department Licensing and attach to applicable payable payable to Department Licensing and attach to applicable payable		of Regulation and		For Receipting Use Only
Training License (This fee is required if you already have a Professional Counselor Training Certificate issued.)				
\$ 53.00 Total Required Fee Attached				
Training License (This fee is required if you have a pending application for a Professional Counselor Training Certificate on file with the Department.)				
\$ 43.00 Total Required Fee Attached				
#2748 (8/06)				

Committed to Equal Opportunity in Employment and Licensing